



STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Morgan	Brett	H.	(916) 323-6001	
MAILING ADDRESS (May use business address)	STREET	CITY	STATE	ZIP CODE
1515 S Street, Suite 502S		Sacramento	CA	95811
			OPTIONAL: FAX / E-MAIL ADDRESS	

1. Office, Agency, or Court

Name of Office, Agency, or Court:

California Department of Corrections & Rehabilitation

Division, Board, District, if applicable:

Office of the Secretary

Your Position:

Chief of Staff

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State☐ County of _____☐ City of _____☐ Multi-County _____☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____☒ Annual: The period covered is January 1, 2008, through December 31, 2008.

-OR-

☒ The period covered is _____, through December 31, 2008.☐ Leaving Office Date Left: ____/____/____ (Check one)☐ The period covered is January 1, 2008, through the date of leaving office.

-OR-

☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 1

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
*Investments (Less than 10% Ownership)*Schedule A-2 ☐ Yes – schedule attached
*Investments (10% or greater Ownership)*Schedule B ☐ Yes – schedule attached
*Real Property*Schedule C ☐ Yes – schedule attached
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*Schedule D ☐ Yes – schedule attached
*Income – Gifts*Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments

-or-

☒ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/6/09
(month, day, year)Signature _____
(File the originally signed statement with your filing official.)